Exchange Work Plan and Timeline

Core Area	2011	2012	2013	2014
Background Research	**Q2 Complete analysis of individual and small group insurance market. The analysis will include determining the size and demographics of the uninsured in Arizona and identifying the largest insurance plans in each market by market share and location.** **Q2 Research has been completed and posted to the Exchange website and has been shared with CCIIO and stakeholders.**	**Q1-Q2 Background research will be used to model potential enrollment in both the Medicaid and commercial insurance components of the Exchange**		

Stakeholder Consultation	Establish ongoing consultation with stakeholders regarding Exchange design and operational issues. Q2 Establish stakeholder work groups on IT Infrastructure, plan certification and design issues. Separate work groups have been established for carriers and brokers. Meetings have begun. Q3 Navigator and Public Education and Outreach work groups will be formed Q2 Establish consultation with the 22 federally recognized tribes in Arizona. The Inter Tribal Council of Arizona will coordinate soliciting tribal input on Exchange design and operational issues.	Continue general stakeholder consultation on design and operational issues. Continue stakeholder workgroups on specific implementation issues. Continue tribal consultation with the 22 federally recognized tribes in Arizona. The Inter Tribal Council of Arizona will coordinate soliciting tribal input on Exchange design and operational issues.	Continue general stakeholder consultation on design and operational issues. Continue stakeholder workgroups on specific implementation issues. Continue consultation with the 22 federally recognized tribes in Arizona. The Inter Tribal Council of Arizona will coordinate soliciting tribal input on Exchange design and operational issues	Continue general stakeholder consultation on design and operational issues. Continue stakeholder workgroups on specific implementation issues. Continue consultation with the 22 federally recognized tribes in Arizona. The Inter Tribal Council of Arizona will coordinate soliciting tribal input on Exchange design and operational issues

Legislative Regulatory Action	Q1 Legislation was introduced in the Legislature to establish an Arizona Health Insurance Exchange that complies with federal requirements. A public hearing was held in the House Banking and Insurance Committee. Q2 Testified before Joint House and Senate Health Committee Hearing on Exchange Status.		Q1 Introduce and enact any enabling legislation necessary to ensure compliance with the ACA.	
Governance	Q3 In consultation with stakeholders develop a governance model that ensures public accountability and transparency.	Q2 Finalize governance structure that has the legal authority to operate an Exchange in Arizona that complies with federal requirements.		

Exchange IT Systems	**Q1 and Q2 Conduct IT Gap Analysis of existing eligibility and enrollment systems, identity potential solutions for eliminating gaps with the ACA requirements and final recommendations on best approaches to meet ACA requirements.** **Q2 Complete IT GAP Analysis.** **Q3 Form work group and retain IT consultant to develop work plan and time line for preparation and award of IT infrastructure Request for Proposal.** **Q3 Issue Request for Information to receive additional information on commercially available programs for the individual and SHOP exchanges.**	**Q2 and Q3 Issue RFP for development, design and maintenance of Exchange website.** **Q3 Award of website RFP**	**Q3 Complete final user testing, including testing of all interfaces.**	
Program Integration	**Q2 Conduct review of current agency procedures and programs and identify changes needed to support Exchange operational requirements.**			

	Q2 Initiative meetings with AHCCCS, Arizona Department of Insurance, Arizona Department of Economic Security and the Health Information Exchange to coordinate efforts needed to establish an Insurance Exchange. **Q4 Finalize an agreement with the Arizona Department of Insurance to coordinate responsibility for the certification and regulation of qualified health plans, risk adjustment program and other Exchange related activities.** **Q4 Finalize an agreement with AHCCCS that coordinates responsibility for eligibility and enrollment in public health programs through the Exchange under a no wrong door policy.**	**Continue collaboration on design and development of Exchange and AHCCCS IT systems to integrate eligibility determination and enrollment process.**		
Financial Management	**Adhere to all HHS financial reporting requirements under the planning grant and establishment cooperative agreement.**	**Adhere to all HHS financial reporting requirements under establishment cooperative agreement.**	**Adhere to all HHS financial reporting requirements under establishment cooperative agreement.**	**Adhere to all HHS financial reporting requirements under establishment cooperative agreement.**

	Q3 Develop financial reporting system to support management activities of the Exchange and comply with all required financial reports by HHS.	**Q2 Develop financial model to determine projected enrollment in the Exchange and annual budget.** **Q3 Determine funding source such as user fees or assessments to ensure Exchange will be self sufficient**		**Submit the required annual accounting report to HHS.**
Oversight & Program Integrity	**Q3 Establish procedures to prevent waste, fraud and abuse regarding the expenditure of Exchange Planning and Establishment Grants.**	**Q3 Establish procedures for an independent, external audit of Exchange finances.** **Q3 Incorporate program integrity requirements into all vendor contracts.**		

Providing Assistance to Individuals and Small Businesses, Coverage Appeals and Complaints	**Q2 The Arizona Department of Insurance will complete review of existing state consumer assistance, coverage appeals process and lay out steps needed to ensure the Exchange has capacity to handle complaints, appeals and requests for assistance.**	**Q2 Determine if the existing appeals process for resolving questions of medical necessity and contract is sufficient and what changes will be needed.** **Q2 Evaluate existing Department of Insurance telephony system to determine capability of handling compliance with the ACA and Exchange requirements.** **Q3 Incorporate into the contract for the call center a customer service component to handle pre-enrollment and post enrollment assistance.**		

Certification of Qualified Health Plans	**Q2 The Arizona Department of Insurance will perform a gap analysis between current licensing requirements compared to the requirements to be a qualified health plan under the ACA.** **Q3 Develop a timeline for the certification process to meet the initial open enrollment period.** **Q2-Q4 Conduct stakeholder meetings and carrier work group on the certification process.**	**Q2 Develop a timeline for integrating the certification process with the IT systems to ensure there is sufficient time to receive and approve filings for qualified health plans and upload to Exchange website.** **Q3 Finalize certification process and make it available to health insurers.** **Q4 Accept applications to be qualified health plans.**	**Q1 Department of Insurance review and certification applications.** **Q2 Certified qualified health plans will be submitted to the Exchange website.**
Call Center	**Q3 Evaluate capability of AHCCCS and DES call centers for incorporation into Exchange.**	**Q2 Develop requirements for call center operations.** **Q2 Issue, evaluate and award RFP for call center vendor.**	**Q2 Launch call center operations, publicize availability of 1-800 number and post information on Exchange website.**
Exchange Website and Calculator	**Q2 As part of the IT gap analysis develop requirements for the Exchange website and online calculator to determine eligibility for premium tax credit, cost sharing subsidies and eligibility for public programs.**	**Q1 Develop systems requirements and issue, evaluate and award RFP.** **Q3 Submit content for informational website to HHS for comment.**	**Q2 Collect qualified health plan data for comparison tool.** **Q3 Launch Exchange website**

	Q3 Consult with stakeholders on website functionality and user value.			
Quality Rating System	**Q2 Begin discussions with carrier work group on quality rating system.** **Q3 Review Federal quality rating system and incorporate into requirements for qualified health plans.** **Q3-Q4 Incorporate quality rating system requirements into RFI and RFP for the IT infrastructure.**	**Q2 Include quality rating requirements into website functionality.**	**Q3 and before open enrollment Post quality ratings on Exchange website.**	**Update quality ratings on a regular basis.**
Navigator Program	**Q3 Review requirements for navigator programs as developed by CCIIO.** **Q3 Conduct stakeholder meetings on role and requirements of navigators.**	**Q2 Determine qualifications of navigators including licensure as an insurance producer.** **Q3 Determine funding source for navigator program.**	**Q1 Issue, evaluate and award contracts to qualified organizations as navigators.**	
Eligibility Determination	**Q1 Begin coordination with AHCCCS, Arizona Department of Economic Security and the Arizona Department of Health Services regarding eligibility requirements for Medicaid, CHIP and other public programs.**	**Q1 Incorporate system requirements for eligibility determination into the Exchange IT systems to comply with no wrong door policy.**	**Q3 or before open enrollment begins, Complete all user testing.**	

	Q2 Conduct IT gap analysis regarding current system requirements and Exchange requirements.		
Enrollment Process	**Q1 Begin coordination with AHCCCS, Arizona Department of Economic Security and the Arizona Department of Health Services regarding eligibility requirements for Medicaid, CHIP and other public programs.** **Q2 Conduct IT gap analysis regarding current system requirements and Exchange requirements.**	**Q1 Incorporate system requirements for eligibility determination into the Exchange IT systems to comply with no wrong door policy**	
Applications and Notices	**Q4 Review and modify HHS requirements for applications and notices.**	**Q2 Incorporate Exchange created applications and notices into systems requirements.** **Q4 Complete stakeholder review and testing of applications and notices.**	**Q1 Finalize all applications and notices prior to open enrollment.**	
Exemptions from Individual Responsibility and Payment	**Q3 Review systems requirements for determining eligibility for individual responsibility exemption.**	**Q1 Begin systems development.**	

Premium Tax Credit and Cost Sharing Reduction Administration	**Q2 Complete IT gap analysis to determine systems requirements.**	**Q2 Begin system development and incorporate requirement into website RFP.** **Q4 Complete user testing.**		
Adjudication of Appeals of Eligibility Determination				
Notification and appeals of employer responsibility payment	**Q4 Incorporate requirement into IT infrastructure RFP.**			
Information Reporting to IRS and Enrollee	**Q4 Incorporate requirement into IT infrastructure RFP.**			
Outreach and Education	**Q3 Retain services of part time employee to prepare basics of marketing, public education and outreach campaign. Q4 Form stakeholder work group to develop marketing and outreach strategic plan.**	**Q1 Develop education and marketing materials, performance metrics and media strategy.** **Q2 Submit final outreach and education plan to HHS.** **Q2 Issue, evaluate and award marketing, media and outreach RFP. Q3 Begin implementation of marketing campaign to build public awareness of the Exchange.**	**Q1 Continue marketing and outreach campaign building up to Exchange Launch**	

Free Choice Vouchers	**Q2 Research IT systems requirements for free choice vouchers as part of the IT gap analysis.** **Q3 Begin developing system requirements.**	**Q2 Incorporate system requirements for free choice voucher into website RFP.**		
SHOP-specific Functions	**Q2 Research the specific requirements for a SHOP Exchange as part of the IT gap analysis.** **Q3 Begin developing system and operational requirements for a SHOP Exchange.**	**Q2 Incorporate SHOP Exchange requirements into website and IT systems design and RFP.**	**Q3 or before open enrollment, Complete final testing of all systems.**	